... FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION (5)

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

	/35 4/73							
	OMB APPROVAL							
	OMB Number: 3235-0076							
	Expires: April 30, 2008 Estimated average burden							
	bours per response: 16.00							
	SEC USE ONLY							
1	08%							
	Projets Serial							
	) naig							
3	DATE RECEIVED							

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)										
Goldman Sachs Hedge Fund Opportunities, Ltd.: Shares										
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6) ☐ ULOE										
Type of Filing: ☐ New Filing ☑ Amendment										
A. BASIC IDENTIFICATION DATA										
1. Enter the information requested about the issuer										
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)										
Goldman Sachs Hedge Fund Opportunities, Ltd.										
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone 08022494										
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540 (609) 497-5500										
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  (Number and Street, City, State, Zip Code)										
Brief Description of Business To operate us a private investment fund										
To operate as a private investment fund.										
LAN 2 5 2008										
Type of Business Organization    corneration   limited partnership, already formed   other (please specify):										
□ corporation □ limited partnership, already formed □ other (please specify): □ business trust □ limited partnership, to be formed □ Exempted Limited Company										
FINANCIAL										
Actual or Estimated Date of Incorporation or Organization:    Month   Year										
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for										
State: CN for Canada; FN for other foreign jurisdiction )  F N										

## GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (7-00)

A. BASIC IDENTIFICATION DATA									
2. Enter the information requested for the following:									
* Each promoter of the issuer, if the issuer has been organized within the past five years;									
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities									
of the issuer;									
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
* Each general and managing partner of partnership issuers.									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Investment Manager)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
701 Mount Lucas Road, Princeton, New Jersey 08540									
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Goldman Sachs Hedge Fund Opportunities Fund, Ltd.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540									
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or  Managing Partner									
Full Name (Last name first, if individual)									
James Graham Brown Foundation									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Attn: Joan R. Dudley, 4350 Brownsboro Rd., Ste. #200, Louisville, Kentucky 40207									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Investment Manager Managing Partner									
Full Name (Last name first, if individual)									
Barbetta, Jennifer									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Investment Manager Managing Partner									
Full Name (Last name first, if individual)  Clark, Kent A.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									
Lawson, Hugh J.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
Check Box(es) that Apply:   Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner									
Full Name (Last name first, if individual)									

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Business or Residence Address (Number and Street, City, State, Zip Code)

<del></del>				B, INI	FORMAT	ION ABO	UT OFFI	ERING		•		
		<del></del>	<del></del>	· · ·			-				Yes	No
1. Has the	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						G	Ø				
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What i	2. What is the minimum investment that will be accepted from any individual?								\$	\$1,000,000*		
*The Issu 3. Does t	er, in its sol he offering	le discretion permit joint	n, may acce ownership	pt subscrip of a single	otions below unit?	w the minin	num.		• • • • • • • • • • • • • • • • • • • •		Yes ☑	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.										<u>.                                    </u>		
Full Name	Full Name (Last name first, if individual)											
	Goldman, Sachs & Co.  Business or Residence Address (Number and Street, City, State, Zip Code)											
85 Broad	Street, Nev	v Vork Ne	w Vork 100	004								
	Associated B											
States in V (Check ".	Vhich Perso All States" o	n Listed Ha	s Solicited (	or Intends t	o Solicit Pu	rchasers	*				🖸 Al	l States
` [AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[Hj]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]_	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]
Full Name	Full Name (Last name first, if individual)											
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of A	Associated E	Broker or De	ealer				<u>-</u>	· · · · · ·	-			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)							🗆 Al					
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	c (Last name	first, if ind	ividual)								·	
Rusiness	or Residence	· Address ()	Number and	Street, Cit	v. State, Zin	Code)						
Business or Residence Address (Number and Street, City, State, Zip Code)								· 				
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[14]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$	0	\$	;	0
	Equity (Shares)	\$	187,370,415	\$	}	187,370,415
	☑ Common ☐ Preferred		•			
	Convertible Securities (including warrants)	\$_	0	\$	·	0
	Partnership Interests	\$_	0	\$	·	0
	Other (Specify)	\$_	0	\$	·	0
	Total	\$_	187,370,415	\$	;	187,370,415
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
	·		Number Investors	,	.:	Aggregate Dollar Amount of Purchases
	Accredited Investors	_	68	\$	:	187,370,415
	Non-accredited Investors		0	\$	;	0
	Total (for filings under Rule 504 only)		N/A	\$		N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		T. 6			Dallan Assault
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505	_	N/A	\$	:	N/A
	Regulation A		N/A	\$		N/A
	Rule 504	_	N/A	\$		N/A
	Total	_	N/A	\$	_	N/A
tł tł	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$	:	0
	Printing and Engraving Costs			\$		0
	Lcgal Fees		$\square$	\$		58,476
	Accounting Fees			\$		0
	Engineering Fees			\$	·	0
	Sales Commissions (specify finders' fees separately)		0	\$		0
	Other Expenses (identify)			\$	·	0
	Total		图	\$		58,476

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXI	ENS	ES A	ND USE OF PE	ROCE	EDS		
	<ul> <li>b. Enter the difference between the aggreg</li> <li>Question 1 and total expenses furnished difference is the "adjusted gross proceeds to</li> </ul>	in response to Part C - Question 4.a	. Thi	is		\$_		187,311,939	
5.	Indicate below the amount of the adjusted at to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted gro to Part C - Question 4.b. above.	If the amount for any purpose is not the left of the estimate. The total	knowr of th	n, e					
					Payments to Officers, Directors, & Affiliates			Payments To Others	
	Salaries and Fees			\$_	0		<b>s</b> _	0	
	Purchase of real estate		\$_	0		\$_	0		
	Purchase, rental or leasing and installation of	f machinery and equipment		\$_	0		\$_	0	
	Construction or leasing of plant buildings ar		\$_	0		\$_	0		
	Acquisition of other businesses (including this offering that may be used in exchan another issuer pursuant to a merger)	ge for the assets or securities of	0	\$	0		\$_	0	
	Repayment of indebtedness			\$	. 0		\$	0	
	Working capital			\$	0	_	\$	0	
	Other (specify): Investment Capital		\$	0	M	\$	.: 187,311,939		
	Column Totals		\$_	0	Ø	\$_	187,311,939		
	Total Payments Listed (column totals added	187,311,939							
		D. FEDERAL SIGNATU	RE						
fe	he issuer has duly caused this notice to be ollowing signature constitutes an undertaking f its staff, the information furnished by the iss	by the issuer to furnish to the U.S. S	ecuriti	es ar	d Exchange Comn	nission,	upon	er Rule 505, the written request	
Issi	uer (Print or Type)			Date		-			
Go Ltc	ldman Sachs Hedge Fund Opportunities, l.		January <u>/6,</u> 2008						
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)							
K o	Viva President of the Issuer's Investment Manager								

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

